

MARION COUNTY BOARD OF COUNTY COMMISSIONERS BUDGET AMENDMENT REQUEST FORM

01/20/2026

Date

TO: MARION COUNTY BOARD OF COUNTY COMMISSIONERS
FROM: *Katrina Neumann, Budget / Finance Commander*

(Name and Title of Department / Agency Head or Authorized Representative)

Requesting the following transfer of funds within the

1110	MSTU FOR LAW ENFORCEMENT
Fund Number	Fund Name

SOURCES OF FUNDS:

Cost Center	Account Number	Cost Center Name Account Name	AMOUNT
120	364080	SHERIFF PATROL CID - TR INSURANCE PROCEEDS - AUTOMOTIVE	\$ 1,534
TOTAL			\$ 1,534

USES OF FUNDS:

Cost Center	Account Number	Cost Center Name Account Name	AMOUNT
120	560101	SHERIFF PATROL CID - TR CAPITAL OUTLAY - MCSD	\$ 1,534
TOTAL			\$ 1,534

PURPOSE OF REQUEST:

The purpose of this request is to add funds to the MSTU budget from insurance proceeds.

Budget amendment requests must be received in the Budget Office before 10:00 A.M. on the Monday preceding regularly scheduled Tuesday meetings of the Board of County Commissioners. Deadlines may be shortened due to the holidays or other scheduling conflicts.

Sheriff Office Reference Number : MSTU # 15